

APR 28 2005

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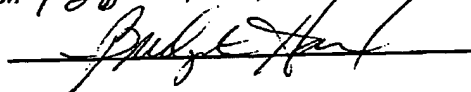
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Fax No. 513-627-0318

Phone No. 513-627-1888

Listed below are the item(s) being submitted with this Certificate of Transmission:**

- 1) Supplemental Information Disclosure Statement – 2 pgs.
- 2) Form SB08
- 3) Form SB17 – fee transmittal – in duplicate
- 4)
- 5)

Comments:

Number of Pages Including this Page: 6

Inventor(s): Connor, et al.

S.N.: 09/786,078

Filed: February 28, 2001

Case: 7262

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Certification of Mailing or Facsimile Transmission I hereby certify that I have reasonable basis to expect that, on the date shown below, this correspondence is being submitted as indicated below: <input type="checkbox"/> mailed or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____ Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 <input checked="" type="checkbox"/> facsimile transmitted to the U.S. Patent and Trademark Office via fax number (703) 872-9306	
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APR 28 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.	:	09/786,078
Applicant(s)	:	Daniel Stedman Connor et al.
Filed	:	February 28, 2001
Title	:	Improved Process for Making Surfactants via Absorptive Separation and Products Thereof
TC/A.U.	:	1700/1751
Examiner	:	B.P. Mruk
Conf. No.	:	8483
Docket No.	:	7262
Customer No.	:	27752

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
 VIA FACSIMILE 703/872-9306

Dear Sir:

Pursuant to 37 C.F.R. §§ 1.56, 1.97 and 1.98, record is being made on the attached Form PTO/SB08 of documents which the Patent Office may wish to consider in connection with examination of the above-identified patent application. It is respectfully requested that the cited documents be carefully considered by the Examiner and made of record in this case. As provided in §1.97(g), no representation is made or intended that a thorough art search was made. As provided in 37 C.F.R. §1.97(h), this Supplemental Information Disclosure Statement does not constitute an admission of any kind, and specifically is not an admission that the documents listed on attached form PTO/SB08 are, or are considered to be, material to the patentability of the above-identified patent application, as defined in 37 C.F.R. §1.56(b).

This information disclosure statement is being submitted under 37 C.F.R. §1.97(c). A final action under 37 C.F.R. §1.113, a notice of allowance under 37 C.F.R. §1.311, or an action that otherwise closes prosecution in the application (e.g., *Ex parte Quayle*) has not been received as of the date of this submission. I hereby elect to pay the fee set forth in 37 C.F.R. §1.17(p). Please charge the fee set forth in 37 C.F.R. §1.17(p) to Deposit Account Number 16-2480 in the name of The Procter & Gamble Company. A fee transmittal form is enclosed to facilitate the charging of the fee. Copies of the cited documents are enclosed.

2

Respectfully submitted,

THE PROCTER & GAMBLE COMPANY

Signature

Laura R. Grunzinger

Typed or printed name

Registration No. 47,616

(513) 627-1888

Date: 4-28-05
Customer No. 27752

Please type a plus sign (+) inside this box → [+]

PTO/SB08A (08-03)

U.S. Patent and Trademark Office; U. S. DEPARTMENT OF COMMERCE

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Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)

SHEET 1 of 1

COMPLETE IF KNOWN

Application Number	09/786,078
Confirmation Number	8483
Filing Date	2/28/2001
First Named Inventor	Connor et al.
Group Art Unit	1751
Examiner Name	Mruk
Attorney Docket Number	7262

U. S. PATENT DOCUMENTS

EXAMINER INITIALS*	Cite No. ¹	DOCUMENT NUMBER Number - Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines Where Relevant Passages or Relevant Figures Appear
	1	US- 4,455,444	06-19-1984	Kulprathipanja et al.	

FOREIGN PATENT DOCUMENTS

EXAMINER INITIALS*	Cite No. ¹	FOREIGN PATENT DOCUMENT Country Code ² Number ³ Kind Code ⁴ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines Where Relevant Passages or Relevant Figures Appear	T ⁵
EXAMINER				DATE CONSIDERED		

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²See Kind Codes of U.S. Patent Documents at www.uspto.gov or MPEP 901.04. ³Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL for FY 2005 Patent fees are subject to annual revision. Effective December 8, 2004	Complete if Known	
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	Confirmation Number	8483
	Filing Date	2/28/2001
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TOTAL AMOUNT OF PAYMENT (\$) 180.00		Attorney Docket No. 7262

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Laura R. Grunzinger	Registration No. (Attorney/Agent)	47,616
Signature		Telephone	(513) 627-1888
		Date	4-28-05

This collection of information is required by 37 CFR 1.14. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Form 2800 (Revised for P&G use 12/14/2004)

FEE TRANSMITTAL for FY 2005 Patent fees are subject to annual revision. Effective December 8, 2004	Complete if Known	
	Application Number	09/786,078
	Confirmation Number	8483
	Filing Date	2/28/2001
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4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE: <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td><input type="checkbox"/> - 20** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Independent Claims</td> <td><input type="checkbox"/> - 3** = <input type="checkbox"/> x</td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Multiple Dependent claims:</td> <td></td> <td><input type="checkbox"/> =</td> <td><input type="checkbox"/></td> </tr> </tbody> </table> ** or number previously paid, if greater; For Reissues, see below Fee Description Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim) SUBTOTAL (4) (\$) <input type="checkbox"/>			Extra Claims	Fee from Below	Fee Paid	Total Claims	<input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Independent Claims	<input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/> =	<input type="checkbox"/>	Multiple Dependent claims:		<input type="checkbox"/> =	<input type="checkbox"/>	SUBTOTAL(5) (\$) [180.00]																														
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Laura R. Gruetzinger	Registration No. (Attorney/Agent)	47,616
Signature		Telephone	(513) 627-1888
		Date	4-28-05

This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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